

EXHIBIT “C”

IN THE COURT OF COMMONPLEAS OF DELAWARE COUNTY, PENNSYLVANIA
CIVIL LAW -- ACTION

PLAINTIFF(S)

No. CV-2022-004141

Lamar Marshall

VS

DEFENDANT (S)

Delaware County d/b/a George W. Hill Correctional Facility, et al

See Attached List of Participants

PRAECIPE FOR WRIT OF SUMMONS

TO THE OFFICE OF JUDICIAL SUPPORT:

Issue summons in civil action in the above.



Signature of Attorney/Pro Se Party

Gary Schafkopf, Esq

11 Bala Ave Bala Cynwyd PA 19004

610-664-5200

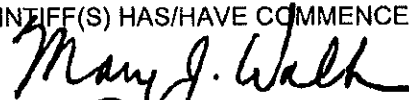
Name/Address/Telephone # of Attorney/Pro Se Party

Attorney Supreme Court ID # 83362

WRIT OF SUMMONS IN CIVIL ACTION

TO: Delaware County d/b/a George W. Hill Correctional Facility; Laura K. Williams; Dele Faly; Lisa Mastroddi
Mr. Bank; Counselor Sam; and Head of Maintenance Department

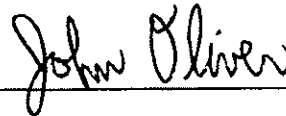
YOU ARE NOTIFIED THAT THE ABOVE- NAMED PLAINTIFF(S) HAS/HAVE COMMENCED AN
ACTION AGAINST YOU.



MARY J. WALK, ESQ., DIRECTOR
OFFICE OF JUDICIAL SUPPORT

Date: June 17, 2022

Deputy:



LIST OF PARTICIPANTS

LAMAR MARSHALL
924 E. 27th Street
Wilmington, DE 19802

Plaintiff,

v.

DELAWARE COUNTY D/B/A GEORGE W. HILL CORRECTIONAL FACILITY
500 Cheyney Rd
Thornton, PA 19373

and

✓ LAURA K. WILLIAMS
Individually and in her official capacity as Warden
500 Cheyney Rd
Thornton, PA 19373

and

DELE FALY
Individually and in his official capacity as Deputy Warden of Programs and Support
500 Cheyney Rd
Thornton, PA 19373

and

LISA MASTRODDI
Individually and in her official capacity as Deputy Warden of Operations and Administration
500 Cheyney Rd
Thornton, PA 19373

and

MR. BANKS
Individually and in his official capacity as Correctional Officer
500 Cheyney Rd
Thornton, PA 19373

and

COUNSELOR SAM
Individually and in her official capacity as Counselor
500 Cheyney Rd

Thornton, PA 19373

and

HEAD OF MAINTENANCE DEPARTMENT

Individually and in his official capacity as Head of Maintenance Department

500 Cheyney Rd

Thornton, PA 19373

Defendants.

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE		INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.	
PROCESS RECEIPT, and AFFIDAVIT OF RETURN			
1. PLAINTIFF/S/ <u>Lamar Marshall</u>		2. COURT NUMBER <u>CV-2022-004141</u>	
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>		4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>	
SERVE AT	5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Mr. Bank</u>		
	6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheyney Rd Thornton PA 19373</u>		
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER			
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.			
8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE		Deputy Sheriff Invoice No. <u>477113</u> Amount Paid <u>\$270.00</u> Docket # Page <div style="text-align: right; font-size: 1.5em;">7 Copies</div>	
NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.			
9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schaffkopf, Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>		10. TELEPHONE NUMBER <u>610-664-5200</u> 11. DATE <u>6-22-22</u> 12. SIGNATURE <u>Gary Schaffkopf</u>	
SPACE BELOW FOR USE OF SHERIFF ONLY – DO NOT WRITE BELOW THIS LINE			
13. I acknowledge receipt of the writ or complaint as indicated above		14. Date Filed <u>6-17-22</u>	
SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>SMKH</u>		15. Expiration/Hearing date <u>30 Days</u>	
TO BE COMPLETED BY SHERIFF			
16. Served and made known to <u>Laura Williams (Warden)</u> , Defendant(s)			
on the <u>29th</u> day of <u>JUNE</u> , 20 <u>22</u> , at <u>230</u> o'clock, <u>P</u> M.,			
at <u>500 Cheyney Rd, Thornton PA 19373</u> Street, County of Delaware,			
Commonwealth of Pennsylvania, in the manner described below:			
<input type="checkbox"/> Defendant(s) personally served. <input type="checkbox"/> Adult family member with whom said Defendant(s) reside(s). Relationship is _____ <input type="checkbox"/> Adult in charge of Defendant's residence. <input type="checkbox"/> Manager/Clerk of place of lodging in which Defendant(s) reside(s). <input checked="" type="checkbox"/> Agent or person in charge of Defendant's office or usual place of business. <input type="checkbox"/> Posted _____ <input type="checkbox"/> Other _____			
On the _____ day of _____, 20____, at _____ o'clock, _____ M.			
Defendant not found because: <input type="checkbox"/> Moved <input type="checkbox"/> Unknown <input type="checkbox"/> No Answer <input type="checkbox"/> Vacant <input type="checkbox"/> Other _____			
REMARKS:			
RETURNED:			
17. AFFIRMED and subscribed to before me this _____		SO ANSWER.	
20 day of _____ 20____		18. Signature of Dep. Sheriff <u>Kevin Scanlon</u>	
23. _____ Notary Public		19. Date <u>6/29/22</u>	
MY COMMISSION EXPIRES _____		21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u>	
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE.		22. Date <u>Jun 30 2022</u>	

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Lamar Marshall</u>	2. COURT NUMBER <u>CV-2022-004141</u>
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>	4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Lisa Mustreddi</u>	
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheyney Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> RES MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER	

SERVE
AT

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477113
Amount Pd. \$270.00
Docket #
Page

4 of 7

7 Copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schafkopf, Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>	10. TELEPHONE NUMBER <u>610-664-5200</u>	11. DATE <u>6-22-22</u>
12. SIGNATURE <u>Gary Schafkopf</u>		

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>MMH</u>	14. Date Filed <u>6-17-22</u>	15. Expiration/Hearing date <u>30 Days</u>
TO BE COMPLETED BY SHERIFF			
16. Served and made known to <u>Laura Williams (Warden)</u> , Defendant(s) on the <u>29th</u> day of <u>JUNE</u> , 20 <u>22</u> , at <u>230</u> o'clock, <u>P</u> M., at <u>500 Cheyney Rd, Thornton PA 19373</u> Street, County of Delaware, Commonwealth of Pennsylvania, in the manner described below: <input type="checkbox"/> Defendant(s) personally served. <input type="checkbox"/> Adult family member with whom said Defendant(s) reside(s). Relationship is <input type="checkbox"/> Adult in charge of Defendant's residence. <input type="checkbox"/> Manager/Clerk of place of lodging in which Defendant(s) reside(s). <input checked="" type="checkbox"/> Agent or person in charge of Defendant's office or usual place of business. <input type="checkbox"/> Posted <input type="checkbox"/> Other			

On the _____ day of _____, 20____, at _____ o'clock, _____ M.
Defendant not found because:
☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____ 20 day of _____ 20____	18. Signature of Deputy Sheriff <u>Kevin Scanlon</u>	19. Date <u>6/29/22</u>
23. _____ Notary Public	21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u>	22. Date <u>Jun 30 2022</u>
MY COMMISSION EXPIRES _____		
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE		

SO ANSWER.

SHERIFF OF DELAWARE COUNTY

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURNINSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type.
Do Not detach any copies.

1. PLAINTIFF/S/ <u>Lamar Marshall</u>	2. COURT NUMBER <u>CV-2022-004141</u>
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>	4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Laura K. Williams</u>	
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheyney Rd Thorton PA 19373</u>	

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHERNow, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477113Amount Paid \$270.00

Docket #

Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffkopf, Esq.
11 Bala Ave
Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

6-22-22

12. SIGNATURE

Gary Schaffkopf

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above } SIGNATURE of Authorized DCSD Deputy or Clerk and Title MMH 14. Date Filed 6-17-22 15. Expiration/Hearing date 30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura Williams (Warden), Defendant(s)
on the 29th day of JUNE, 20 22, at 2:30 o'clock, P M.,
at 500 Cheyney Rd, Thorton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☒ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☐ Agent or person in charge of Defendant's office or usual place of business.
- ☐ Posted _____
- ☐ Other _____

On the _____ day of _____, 20_____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____	SO ANSWER.	
20 day of _____ 20_____	18. Signature of Dep Sheriff <u>Kevin Scanlan</u>	19. Date <u>6/29/22</u>
21. Signature of Sheriff _____	22. Date _____	
23. _____ Notary Public	SHERIFF OF DELAWARE COUNTY	
MY COMMISSION EXPIRES _____	25. Date Received <u>June 30 2022</u>	

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

DCSD-1-1989

FILED

07-19-2022 03:47 PM
OFFICE OF JUDICIAL SUPPORT
DELAWARE COUNTY, PA

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Lamar Marshall</u>		2. COURT NUMBER <u>CV-2022-004141</u>	
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>		4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>	
SERVE → AT	5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Head of Maintenance Department</u>		
	6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Chynny Rd Thornton PA 19373</u>		
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER			
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.			

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

SHERIFF OF DELAWARE COUNTY

Deputy Sheriff

Invoice No. 477113
 Amount Pd. \$270.00
 Docket #
 Page

1 of 7

7 Copies

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9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schaffkopf Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>		10. TELEPHONE NUMBER <u>610-664-5200</u>	11. DATE <u>6-22-22</u>
		12. SIGNATURE <u>Gary Schaffkopf</u>	

SPACE BELOW FOR USE OF SHERIFF ONLY – DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>MMH</u>	14. Date Filed <u>6-17-22</u>	15. Expiration/Hearing date <u>30 Days</u>
---	--	----------------------------------	---

TO BE COMPLETED BY SHERIFF

16. Served and made known to Laura Williams (Warden), Defendant(s)
 on the 29th day of JUNE, 2022, at 230 o'clock, A M.,
 at 500 Chynny Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business.
☐ Posted _____
☐ Other _____

On the _____ day of _____, 20____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____ 20 day of _____ 20____		SO ANSWER. 18. Signature of Dep. Sheriff <u>Kevin Sanders</u>		19. Date <u>6/29/22</u>
23. _____ Notary Public		21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u>		22. Date <u>6/29/22</u>
MY COMMISSION EXPIRES _____		SHERIFF OF DELAWARE COUNTY <u>6/30/2022</u>		
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE				

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

**SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN**

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Lamar Marshall</u>		2. COURT NUMBER <u>CV-2022-004141</u>
3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>		4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Delc Fahy</u>		
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheyney Rd Thorton PA 19373</u>		
7. INDICATE UNUSUAL SERVICE <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER		
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of <u>County</u> to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.		
8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE		

Deputy Sheriff
Invoice No. 477113
Amount Paid \$270.00
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9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schafkopf, Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>	10. TELEPHONE NUMBER <u>610-664-5200</u>	11. DATE <u>6-22-22</u>
12. SIGNATURE <u>Gary Schafkopf</u>		

SPACE BELOW FOR USE OF SHERIFF ONLY – DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>GMNH</u>	14. Date Filed <u>6-17-22</u>	15. Expiration/Hearing date <u>30 Days</u>
TO BE COMPLETED BY SHERIFF			
16. Served and made known to <u>Laura Williams (Warden)</u> , Defendant(s)			
on the <u>29th</u> day of <u>JUNE</u> , 20 <u>22</u> , at <u>230</u> o'clock, <u>P</u> M.,			
at <u>500 Cheyney Rd, Thorton PA 19373</u> Street, County of Delaware,			
Commonwealth of Pennsylvania, in the manner described below:			
<input type="checkbox"/> Defendant(s) personally served.			
<input type="checkbox"/> Adult family member with whom said Defendant(s) reside(s). Relationship is _____			
<input type="checkbox"/> Adult in charge of Defendant's residence.			
<input type="checkbox"/> Manager/Clerk of place of lodging in which Defendant(s) reside(s).			
<input checked="" type="checkbox"/> Agent or person in charge of Defendant's office or usual place of business.			
<input type="checkbox"/> Posted _____			
<input type="checkbox"/> Other _____			

On the _____ day of _____, 20____, at _____ o'clock, _____ M.
Defendant not found because:
☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____		SO ANSWER.	
20 day of _____ 20____		18. Signature of Dep Sheriff <u>Kevin Scanlan</u>	19. Date <u>6/29/22</u>
23. _____ Notary Public		21. Signature of Sheriff <u>Jerry L. Sanders Jr.</u>	22. Date <u>JUN 30 2022</u>
MY COMMISSION EXPIRES _____		SHERIFF OF DELAWARE COUNTY	
24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE		Date Received	

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

Scanlon
6/29/22SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

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3. DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>	4. TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Delaware County d/b/a George W. Hill Correctional Facility</u>	
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheyney Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER	
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.	

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 477113Amount Pd. \$270.00

Docket #

Page

1 of 7

7 copies

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9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffkopf Esq
11 Bala Ave
Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

6-22-22

12. SIGNATURE

Gary Schaffkopf

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>MMH</u>	14. Date Filed <u>6-17-22</u>	15. Expiration/Hearing date <u>30 Days</u>
---	--	----------------------------------	---

TO BE COMPLETED BY SHERIFF

16. Served and made known to George W Hill CF, Defendant(s)
on the 29 day of JUNE, 20 22, at 2:30 o'clock, P M.,
at 500 Cheyney Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☐ Agent or person in charge of Defendant's office or usual place of business.

☐ Posted☒ Other Casara Williams (Warden)

On the _____ day of _____, 20____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____

20 day of _____ 20____

23. _____ Notary Public

SO ANSWER.

18. Signature of
Dep Sheriff

21. Signature of Sheriff

19. Date
6/29/22

22. Date

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

Jerry L. Sanders Jr.

25. Date Received JUN 30 2022

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1 PLAINTIFF/S/ <u>Lamar Marshall</u>		2 COURT NUMBER <u>CV-2022-004141</u>
3 DEFENDANT/S/ <u>Delaware County d/b/a George W. Hill Correctional Facility et al</u>		4 TYPE OF WRIT OR COMPLAINT <u>Writ of Summons</u>
SERVE ➔ AT	5 NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE <u>Counselor Sam</u>	
	6 ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Chynney Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE: <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER		

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff
Invoice No. 477113
Amount Pdt. \$270.00
Docket #
Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR <u>Gary Schafkopf Esq</u> <u>11 Bala Ave</u> <u>Bala Cynwyd PA 19004</u>	10. TELEPHONE NUMBER <u>610-664-5200</u>	11. DATE <u>6-22-22</u>
12. SIGNATURE <u>Gary Schafkopf</u>		

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above	SIGNATURE of Authorized DCSD Deputy or Clerk and Title <u>OmKH</u>	14. Date Filed <u>6-17-22</u>	15. Expiration/Hearing date <u>30 Days</u>
TO BE COMPLETED BY SHERIFF			
16. Served and made known to <u>Laura Williams (warden)</u> , Defendant(s)			
on the <u>29th</u> day of <u>JUNE</u> , 20 <u>22</u> , at <u>230</u> o'clock, <u>P</u> M.,			
at <u>500 Chynney Rd, Thornton PA 19373</u> Street, County of Delaware.			
Commonwealth of Pennsylvania, in the manner described below:			
<input type="checkbox"/> Defendant(s) personally served. <input type="checkbox"/> Adult family member with whom said Defendant(s) reside(s). Relationship is _____ <input type="checkbox"/> Adult in charge of Defendant's residence. <input type="checkbox"/> Manager/Clerk of place of lodging in which Defendant(s) reside(s). <input checked="" type="checkbox"/> Agent or person in charge of Defendant's office or usual place of business. <input type="checkbox"/> Posted <input type="checkbox"/> Other _____			

On the _____ day of _____, 20____, at _____ o'clock, _____ M.
 Defendant not found because:
☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17 AFFIRMED and subscribed to before me this _____	SO ANSWER.	
20 day of _____ 20____	18 Signature of Dep Sheriff <u>[Signature]</u>	19 Date <u>6/29/22</u>
23 _____ Notary Public	21 Signature of Sheriff <u>[Signature]</u>	22 Date
MY COMMISSION EXPIRES _____	SHERIFF OF DELAWARE COUNTY	
24 I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE	25 Date Received <u>Jun 30 2022</u>	

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

**SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN**INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type.
Do Not detach any copies.

1 PLAINTIFF/S/

Lamar Marshall

2 COURT NUMBER

CN-2022-004141

3 DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

4 TYPE OF WRIT OR COMPLAINT

Civil Action Complaint

SERVE

5 NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVICE

Mr. Banks

AT

6 ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cherry Rd Thornton PA 193737. INDICATE UNUSUAL SERVICE ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHERNow, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of Delaware County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8 SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 479079Amount Pd. \$235.00

Docket #

Page

5 of 77 copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffert Esq
11 Bala Ave

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-29-22

12. SIGNATURE

151 Gary Schaffert

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14 Date Filed

15 Expiration/Hearing date

MMH 7-28-2230 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

on the 10th day of Augustat 500 Cherry Rd, Thornton PA 19373Defendant(s)
8 M.
Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business.

☐ Posted☐ Other _____

On the _____ day of _____, 20____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17 AFFIRMED and subscribed to before me this _____

20 day of _____ 20____

23. _____
Notary Public

SO ANSWER

18 Signature of
Dep Sheriff

21 Signature of Sheriff

19 Date 8/10/2222 Date 12 2022

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25 Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Lamar Marshall

2. COURT NUMBER

2022 CV-2022-804141

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

4. TYPE OF WRIT OR COMPLAINT

Civil Action Complaint

SERVE

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Lisa Mastrotoddi

AT

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheyney Rd. Thornton PA 19373

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20_____, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of _____ County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No.

Amount Paid

Docket #

Page

479079

\$235.00

4 of 7

7 Copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schatkeff Esq

11 Bala Ave

Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5250

11. DATE

7-29-22

12. SIGNATURE

1st Gary Schatkeff

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

15. Expiration/Hearing date

GMMH

7-28-22

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

on the 10th day of August

at 500 Cheyney Rd, Thornton PA 19373

Defendant(s)

2:10 o'clock, P M.

Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business.

☐ Posted☐ Other _____

On the _____ day of _____, 20_____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____

20 day of _____ 20_____,

23. _____ Notary Public

SO ANSWER.

18. Signature of Deputy Sheriff

21. Signature of Sheriff

19. Date 8/10/22

22. Date 8/12/22

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURNINSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type.
Do Not detach any copies.

1. PLAINTIFF/S/

Lamar Marshall

2. COURT NUMBER

CV-2022-004141

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

4. TYPE OF WRIT OR COMPLAINT

Civil Action Complaint

SERVE



AT

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Laura K. Williams

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No.

Amount Pd.

Docket #

Page

479079

\$235.00

#

#

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN - Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schalkert, Esq.

11 Bala Ave

Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-29-22

12. SIGNATURE

141 Gary Schalkert

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

7-28-22

15. Expiration/Hearing date

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

on the 10th day of

at 500 Cheney Rd, Thornton PA 19373

Defendant(s)

2:10 o'clock, P.M.

Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business.
- ☐ Posted
- ☐ Other

On the day of 20, at o'clock, M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this

20 day of 20

23 Notary Public

SO ANSWER.

18. Signature of Dep. Sheriff

21. Signature of Sheriff

19. Date

8/10/22

22. Date

AUG 12 2022

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Lamar Marshall

2. COURT NUMBER

CV-2022-004141

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

4. TYPE OF WRIT OR COMPLAINT

Civil Action Complaint

SERVE

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Head of Maintenance Department

AT

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheyney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No.

479079

Amount Pd.

\$235.00

Docket #

Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schafkopf Esq

11 Bala Ave

Bala Cynwyd PA 19004

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-29-22

12. SIGNATURE

B1 Gary Schafkopf

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

7-28-22

15. Expiration/Hearing date

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to

on the 10th day of August

at 500 Cheyney Rd, Thornton PA 19373

20 22 at 2:10 o'clock, P M.

Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is _____
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business.

☐ Posted☐ Other _____

On the _____ day of _____, 20_____, at _____ o'clock, _____ M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other _____

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____

20 day of _____ 20_____

23 _____ Notary Public

SO ANSWER.

18. Signature of Deputy Sheriff

21. Signature of Sheriff

19. Date

8/10/22

23. Date

AUG 12 2022

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/ <u>Lamar Marshall</u>	2. COURT NUMBER <u>CV-2022-004141</u>
3. DEFENDANT/S/ <u>Delaware County Jdla George W. Hill Correctional Facility</u>	4. TYPE OF WRIT OR COMPLAINT <u>Civil Action Complaint</u>
5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVICE <u>Dele Faly</u>	
6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code) <u>500 Cheney Rd Thornton PA 19373</u>	
7. INDICATE UNUSUAL SERVICE <input type="checkbox"/> REG MAIL <input type="checkbox"/> DEPUTIZE <input type="checkbox"/> POST <input type="checkbox"/> OTHER	
Now, <u>20</u> , I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.	

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

SHERIFF OF DELAWARE COUNTY

Deputy Sheriff

Invoice No.

Amount Pd

Docket #

Page

479079

\$235.00

30/7

7 copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN — Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

10. TELEPHONE NUMBER

11. DATE

Gary Schaffert, Esq

610-664-5200

7-29-22

11 Bala Ave

12. SIGNATURE

Bala Cunnell PA 19004

1st Gary Schaffert

SPACE BELOW FOR USE OF SHERIFF ONLY — DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above } SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

15. Expiration/Hearing date

MMH 7-28-22

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Nikki Miller, Defendant(s)
on the 10th day of August, 20 22, at 2:10 o'clock, P M.,
at 500 Cheney Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
☐ Adult in charge of Defendant's residence.
☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
☒ Agent or person in charge of Defendant's office or usual place of business.
☐ Posted
☐ Other

On the _____ day of _____, 20____, at _____ o'clock, _____ M.
Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this _____	SO ANSWER.	
20. day of _____ 20____	18. Signature of Dep. Sheriff <u>[Signature]</u>	19. Date <u>8/10/22</u>
23. _____ Notary Public	21. Signature of Sheriff <u>[Signature]</u>	22. Date <u>Aug 12 2022</u>
MY COMMISSION EXPIRES _____		SHERIFF OF DELAWARE COUNTY

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SCAN/AD
8/14SHERIFF SERVICE
PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Lamer Marshall

3. DEFENDANT/S/

Delaware County d/b/a George W. Hill Correctional Facility

2. COURT NUMBER

CV-2022-004141

4. TYPE OF WRIT OR COMPLAINT

Civil Action Complaint

SERVE



AT

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Delaware County d/b/a George W. Hill Correctional Facility

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheyney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

SHERIFF OF DELAWARE COUNTY

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

Deputy Sheriff

Invoice No. 479079

Amount Pd. \$235.00

Docket #

Page

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN - Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schafkopf, Esq

11 Bala Ave

Bala Cynwyd PA 19034

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-29-22

12. SIGNATURE

1st Gary Schafkopf

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above.

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

THH

14. Date Filed

7-28-22

15. Expiration/Hearing date

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to Nikki Miller on the 10th day of August, 2022 at 2:10 o'clock, P.M. at 500 Cheyney Rd, Thornton PA 19373 Street, County of Delaware.

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☒ Agent or person in charge of Defendant's office or usual place of business.

☐ Posted☐ Other

On the day of 20, at o'clock, M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this

20 day of 20

23 Notary Public

SO ANSWER.

18. Signature of Dep Sheriff

21. Signature of Sheriff

19. Date 8/10/22

22. Date 8/12/2022

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received

SHERIFF'S DEPARTMENT

DELAWARE COUNTY

201 WEST FRONT STREET, MEDIA, PENNSYLVANIA 19063 (610) 891-4296

SHERIFF SERVICE PROCESS RECEIPT, and AFFIDAVIT OF RETURN

INSTRUCTIONS FOR SERVICE OF PROCESS: You must file one instruction sheet for each defendant. Please type. Do Not detach any copies.

1. PLAINTIFF/S/

Lamar Marshall

3. DEFENDANT/S/

Delaware County d/b/k George W. Hill Correctional Facility

SERVE



AT

5. NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVICE

Counselor Sam

6. ADDRESS (Street or RFD, Apartment No., City, Boro, Twp., State and ZIP Code)

500 Cheyney Rd Thornton PA 19373

7. INDICATE UNUSUAL SERVICE: ☐ REG MAIL ☐ DEPUTIZE ☐ POST ☐ OTHER

Now, 20, I, SHERIFF OF DELAWARE COUNTY, PA., do hereby deputize the Sheriff of County to execute this Writ and make return thereof according to law. This deputation being made at the request and risk of the plaintiff.

8. SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE

SHERIFF OF DELAWARE COUNTY

Deputy Sheriff

Invoice No.

Amount Pd.

Docket #

Page

479079

\$235.00

6 of 7

7 Copies

NOTE ONLY APPLICABLE ON WRIT OF EXECUTION: N.B. WAIVER OF WATCHMAN - Any deputy sheriff levying upon or attaching any property under within writ may leave same without a watchman, in custody of whomever is found in possession, after notifying person of levy or attachment, without liability on the part of such deputy or the sheriff to any plaintiff herein for any loss, destruction or removal of any such property before sheriff's sale thereof.

9. PRINT/TYPE NAME AND ADDRESS OF ATTORNEY/ORIGINATOR

Gary Schaffert, Esq.

11 Bala Ave

Bala Cynwyd PA 19024

10. TELEPHONE NUMBER

610-664-5200

11. DATE

7-21-22

12. SIGNATURE

B/Gary Schaffert

SPACE BELOW FOR USE OF SHERIFF ONLY - DO NOT WRITE BELOW THIS LINE

13. I acknowledge receipt of the writ or complaint as indicated above.

SIGNATURE of Authorized DCSD Deputy or Clerk and Title

14. Date Filed

15. Expiration/Hearing date

SMH 7-28-22

30 Days

TO BE COMPLETED BY SHERIFF

16. Served and made known to on the 10th day of August at 500 Cheyney Rd, Thornton PA 19373 2:10 o'clock, P M. Defendant(s)

Commonwealth of Pennsylvania, in the manner described below:

- ☐ Defendant(s) personally served.
- ☐ Adult family member with whom said Defendant(s) reside(s). Relationship is
- ☐ Adult in charge of Defendant's residence.
- ☐ Manager/Clerk of place of lodging in which Defendant(s) reside(s).
- ☐ Agent or person in charge of Defendant's office or usual place of business.
- ☐ Posted
- ☐ Other

On the day of 20, at o'clock, M.

Defendant not found because:

- ☐ Moved ☐ Unknown ☐ No Answer ☐ Vacant ☐ Other

REMARKS:

RETURNED:

17. AFFIRMED and subscribed to before me this

20 day of 20

23. Notary Public

18. Signature of Dep. Sheriff

21. Signature of Sheriff

SO ANSWER

19. Date 8/10/22

22. Date 12/20/22

SHERIFF OF DELAWARE COUNTY

MY COMMISSION EXPIRES

24. I ACKNOWLEDGE RECEIPT OF THE SHERIFF'S RETURN SIGNATURE OF AUTHORIZED ISSUING AUTHORITY AND TITLE

25. Date Received